



Parkview Rehabilitation Center Stroke Outcomes for 2011

The Parkview Rehabilitation Center is a state-of-the-art, comprehensive inpatient medical rehabilitation program accredited by CARF (the Commission on Accreditation of Rehabilitation Facilities). Located within Parkview Hospital Randallia, the program is in the top 3 percent of facilities accredited by CARF in the 2009 - 2012 survey. The Rehab Center provides a full range of inpatient services and programs to support patients of Parkview's verified Level II Adult and Pediatric Trauma Centers and Parkview Stanley Wissman Stroke Center, the region's first primary stroke center certified through The Joint Commission.

Our goal is to help patients in their recovery from an illness or trauma that interferes with their ability to move, think and care for themselves. Our experienced staff cares for patients age 6 and older.

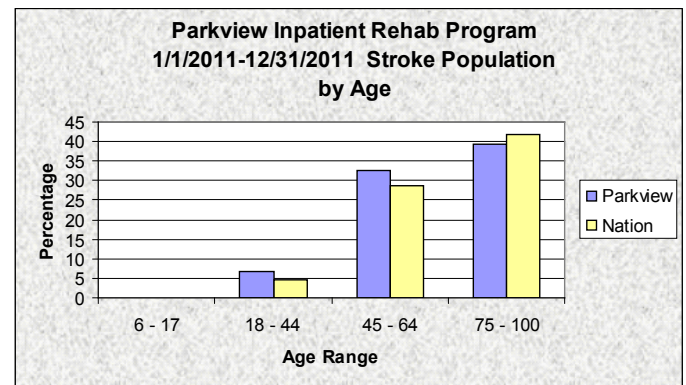
Patients diagnosed with stroke may come to rehab enrolled in one of the many research studies being conducted.

POPULATION SERVED

	Parkview Percentage	Nation Percentage
Stroke	46	22
Pediatric patients with stroke		1
Total number of stroke patients		167

Source: UDS-PROi® On Demand Number of Cases Report
(1/1/11 – 12/31/11)

AGE



Source: Standard Facility Report, UDS-PRO® Edition, Vol. 25, Qtr. 4
January 2011 – December 2011

FUNCTIONAL IMPROVEMENT

Meeting goals

At admission, the patients and families actively participate in setting goals for their stay. They meet with their team members weekly to review progress toward those goals.

On average, patients within the Stroke Program met 80 percent of their long-term goals in 2011.

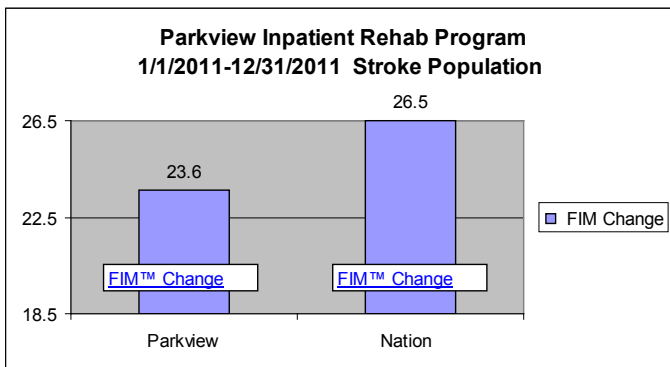
Source: Internal data

Functional status

The following table compares functional status at admission and at discharge, as well as the change compared to the national average. Improvement in function is measured by the Functional Independence Measure (FIM™) instrument.

FUNCTIONAL IMPROVEMENT (continued)

The FIM instrument encompasses 18 functional areas: eating, grooming, bathing, dressing upper body, dressing lower body, toileting, bladder management, bowel management, basic transfers, toilet transfers, tub/shower transfers, walking/wheelchair use, stairs, comprehension, expression, social interaction, problem-solving and memory. Each area is measured with a scale from 1 (representing “dependent”) through 7 (representing “independent”).



	Parkview	Nation
Admission FIM™	59.2	54.3
Discharge FIM™	82.7	80.9

Source: Standard Facility Report, UDS-PRO® Edition, Vol. 25, Qtr. 4 January 2011 – December 2011

Average number of therapy hours received

Patients received, on average, 3 hours of physical, occupational and/or speech therapy per day.

Source: Internal program data

Functional status three months post-discharge

- 92.2 percent of our patients maintained function or did better than their status at discharge.
- National average was 92.3 percent.

Source: UDS-PROi® On Demand Discharge to Follow-up Report – Follow-up Assessment Year 2011

LENGTH OF STAY AND LENGTH-OF-STAY EFFICIENCY

The length-of-stay efficiency reflects the amount of progress in function a patient makes in comparison to the number of days he or she spends in the program. The higher the number, the higher the efficiency.

	Parkview	Nation
Length of Stay	15	16
Length-of-stay Efficiency	1.70	2.02

Source: Standard Facility Report, UDS-PRO® Edition, Vol. 25, Qtr. 4 January 2011 – December 2011

RETURN-TO-COMMUNITY RATE

Another measure of quality is the percentage of patients who are discharged to their homes or to other community settings, rather than to a skilled nursing or hospital setting.

Many of our stroke patients have families who are unable to care for them in a community setting at the time when discharge is imminent. The next best discharge destination is a sub-acute setting, enabling the family to prepare for the patient’s transition back home.

Percentage of patients discharged to:

	Parkview	Nation
Community	59	70
Long-term care	1	11
Acute	7	10
Sub-acute and Post-acute	34	9

Source: Standard Facility Report, UDS-PRO® Edition, Vol. 25, Qtr. 4 January 2011 – December 2011

Three months post-discharge

At three-month contact, 89 percent of patients were in a community setting. At discharge from our program, 48 patients had been sent to a non-community setting. At three-month contact, 36 of them had subsequently been transitioned to a community setting.

Source: UDS-PROi® On Demand Discharge to Follow-up Report – Follow-up Assessment Year 2011

PATIENT SATISFACTION

Discharge

At discharge, 90 percent of patients with stroke identified their overall satisfaction with their experience as “excellent” or “very good.”

Source: Professional Research Consultants 2011 surveys

Three months post-discharge

MedTel requests that patients be contacted and rate our facility on a 1-4 scale for overall satisfaction.

- Our facility average score for 2011 was 3.85.
- National average for 2011 was 3.69.

Source: MedTel Outcomes, LLC, Annual Report for Follow-up Dates
1/1/11 – 12/31/11

What patients and their family members are saying about us:

“Everyone did an excellent job.”

“Everyone was absolutely fantastic. We are so happy with Parkview’s rehab program.”

IMPORTANT PHONE NUMBERS

For admission or more information on the Parkview Rehabilitation Center, call (888) 480-5151 or (260) 373-6404.

Visit Parkview online at www.parkview.com.